

AO 458 (Rev. 10/95) Appearance

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# United States District Court

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DISTRICT OF

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## APPEARANCE

CASE NUMBER:

To the Clerk of this court and all parties of record:

Enter my appearance as counsel in this case for

I certify that I am admitted to practice in this court.

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Date

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Signature

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Print Name

Bar Number

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Address

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City

State

Zip Code

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Phone Number

Fax Number